

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212518426				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: SOUTHERN INSURANCE COMPANY OF VIRGINIA</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JAMES R PARKER 801 VIRGINIA VILLAGE DR PO BOX 1279 GLEN ALLEN, VA 23060</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 4/30/2012</p> <p>SCC ID NO: 00427617</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>3,384,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	3,384,000
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COMMON	3,384,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: P.O. BOX 302</p> <p style="margin-left: 40px;">CITY/ST/ZIP: MARIETTA, PA 17547</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DONALD HERBERT NIKOLAUS TITLE: PRESIDENT ADDRESS: 1520 QUARRY ROAD P.O. BOX 286 CITY/ST/ZIP/CO: SILVER SPRING, PA 17575 </td> <td style="width: 50%; vertical-align: top; text-align: right;"> <input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: DONALD HERBERT NIKOLAUS TITLE: PRESIDENT ADDRESS: 1520 QUARRY ROAD P.O. BOX 286 CITY/ST/ZIP/CO: SILVER SPRING, PA 17575	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ROY RICHARD SHERBAHN TITLE: DIRECTOR ADDRESS: 553 OAK RIDGE DR CITY/ST/ZIP/CO: MILLERSVILLE, PA 17551 </td> <td style="width: 50%; vertical-align: top; text-align: right;"> <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: ROY RICHARD SHERBAHN TITLE: DIRECTOR ADDRESS: 553 OAK RIDGE DR CITY/ST/ZIP/CO: MILLERSVILLE, PA 17551	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
NAME: ROY RICHARD SHERBAHN TITLE: DIRECTOR ADDRESS: 553 OAK RIDGE DR CITY/ST/ZIP/CO: MILLERSVILLE, PA 17551	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Daniel John Wagner TITLE: SVP/Treas ADDRESS: 1437 Bossler Road CITY/ST/ZIP/CO: Elizabethtown, PA 17022 </td> <td style="width: 50%; vertical-align: top; text-align: right;"> <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Daniel John Wagner TITLE: SVP/Treas ADDRESS: 1437 Bossler Road CITY/ST/ZIP/CO: Elizabethtown, PA 17022	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR		
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NAME:	Jeffrey Dean Miller	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP\CFO		
ADDRESS:	9049 Elizabethtown Road		
CITY/ST/ZIP/CO:	Elizabethtown, PA 17022		
NAME:	Patricia Anne Gilmartin	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11 Pajill Drive		
CITY/ST/ZIP/CO:	Marietta, PA 17547		
NAME:	Jack Lee Hess	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1036 Hunt Club Lane		
CITY/ST/ZIP/CO:	Lancaster, PA 17601		
NAME:	John Erb Hiestand	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	243 Blossom Trail		
CITY/ST/ZIP/CO:	Mount Joy, PA 17552		
NAME:	KEVIN MICHAEL KRAFT SR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	792 CHESTNUT HILL DRIVE		
CITY/ST/ZIP/CO:	COLUMBIA, PA 17512		
NAME:	JOHN JOSEPH LYONS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	65 VALLEY ROAD		
CITY/ST/ZIP/CO:	ALLENDALE, NJ 07401		
NAME:	JON MARSHALL MAHAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	459 OLD ORCHARD CIRCLE		
CITY/ST/ZIP/CO:	MILLERSVILLE, MD 21108		
NAME:	SEWELL TREZEVANT MOORE JR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	113 WOODS LANE		
CITY/ST/ZIP/CO:	RADNOR, PA 19087		
NAME:	RICHARD DURWOOD WAMPLER II	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4420 AVON DRIVE		
CITY/ST/ZIP/CO:	HARRISBURG, PA 17112		
NAME:	VINCENT ANTHONY VIOZZI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP INVESTMENTS		
ADDRESS:	129 LOCUST STREET		
CITY/ST/ZIP/CO:	ANNVILLE, PA 17003		
NAME:	KEVIN GERARD BURKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP\HR		
ADDRESS:	1534 CHADWYCK LANE		
CITY/ST/ZIP/CO:	MANHEIM, PA 17545		

NAME:	RANDALL ROY FARLESS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP SALES\MKTG		
ADDRESS:	3725 CROWN HILL DRIVE		
CITY/ST/ZIP/CO:	SANTA ROSA, CA 95404		
NAME:	CYRIL JAMES GREENYA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP\CUO\CCO		
ADDRESS:	154 SOUTH 11TH STREET		
CITY/ST/ZIP/CO:	COLUMBIA, PA 17512		
NAME:	FRANCIS JOSEPH HAEFNER JR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP\COMM LINES		
ADDRESS:	573 FRIENDSHIP AVENUE		
CITY/ST/ZIP/CO:	LANCASTER, PA 17601		
NAME:	JEFFREY ALAN JACOBSEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP PERS LINES		
ADDRESS:	2009 CHAPEL FORGE DRIVE		
CITY/ST/ZIP/CO:	LANCASTER, PA 17601		
NAME:	RICHARD GEORGE KELLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP MKTG		
ADDRESS:	4439 DUNMORE DRIVE		
CITY/ST/ZIP/CO:	HARRISBURG, PA 17112		
NAME:	SANJAY PANDEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP IT\CIO		
ADDRESS:	1425 CHADWYCK LANE		
CITY/ST/ZIP/CO:	MANHEIM, PA 17545		
NAME:	ROBERT GARY SHENK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP CLAIMS		
ADDRESS:	50 ORCHARD ROAD		
CITY/ST/ZIP/CO:	HUMMELSTOWN, PA 17036		
NAME:	WAYNE HUBERT SMITH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP GA REGION		
ADDRESS:	7040 GROSVENOR PLACE		
CITY/ST/ZIP/CO:	CUMMING, GA 30040		
NAME:	JASON MICHAEL CRUMBLING	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & CONTROLLER		
ADDRESS:	722 CHICKIES DRIVE		
CITY/ST/ZIP/CO:	MARIETTA, PA 17512		
NAME:	WILLIAM ALBERT FOLMAR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP CLAIMS		
ADDRESS:	34 HILLCREST ROAD		
CITY/ST/ZIP/CO:	MARIETTA, PA 17547		
NAME:	DAVID SCOTT KRENKEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP MKTG		
ADDRESS:	307 TERRACE ROAD		
CITY/ST/ZIP/CO:	MOUNT JOY, PA 17552		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT R LONG JR VP HOUSE COUNSE 21 KEYSTONE DRIVE MECHANICSBURG, PA 17050	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES RANSOM PARKER REGIONAL VP 3821 COTLEY COURT RICHMOND, VA 23233	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTINA MARIE SPRINGER VP INT AUDITING 1630 NORTH UNION ST MIDDLETOWN, PA 17057	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHESTER JOHN SZCZEPANSKI VP CHIEF ACTUAR 50 OLD ENGLISH LANE ELIZABETHTOTWN, PA 17022	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ Daniel John Wagner		Daniel John Wagner, SVP/Treas		5/17/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					